



Water Resources Program
Application for Change/Transfer
of Water Right

For Ecology Use
(Date Stamp)

RECEIVED

AUG 29 2012

DEPT OF ECOLOGY
NWRO - WR

**For filing with the Department of Ecology or with
County Water Conservancy Boards**

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION
IF FILED WITH THE DEPARTMENT OF ECOLOGY**

(Check all that apply.)

- ☐ Change purpose(s) of use
☐ Add purpose(s) of use
☐ Change point(s) of diversion/withdrawal
☒ Add point(s) of diversion/withdrawal
☒ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: See the attached Associated Earth Sciences, Inc.,
"Project Summary Report" dated August 8, 2012.

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 8-29-12
CHECK NO. 7219 FEE \$ 50-
DATE ACCEPTED 8/29/12 BY DD
CHANGE NO. CG1-# 6245KE/1766
COUNTY What WRIA 1
SPECIAL AREA _____

SEPA: ☐ EXEMPT ☐ NOT EXEMPT

ECY CODING: 001-002-WR10285-000011

APP NO. _____ PERMIT NO. _____

CERT NO. _____ CERT OF CHG NO. _____

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

REET 8/30/12

1. Applicant Information

APPLICANT/BUSINESS NAME <u>Andy Enfield/Enfield Farms, Inc.</u>	PHONE NO. <u>360-354-3019</u>	FAX NO.
ADDRESS <u>1064 Birch Bay Lynden Road</u>		
CITY <u>Lynden</u>	STATE <u>WA</u>	ZIP CODE <u>98264</u>
CONTACT (IF DIFFERENT FROM ABOVE) <u>Charles S. Lindsay/Associated Earth Sciences, Inc.</u>	PHONE NO. <u>425-259-0522</u>	FAX NO. <u>425-252-3408</u>
ADDRESS <u>2911 1/2 Hewitt Ave., Suite 2</u>		
CITY <u>Everett</u>	STATE <u>WA</u>	ZIP CODE <u>98201</u>
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <u>Marvin & Linda Enfield Family LLC; Enfield Family LLC; Enfield Family II LLC</u>	PHONE NO. <u>360-354-3019</u>	FAX NO.
ADDRESS <u>1064 Birch Bay Lynden Road</u>		
CITY <u>Lynden</u>	STATE <u>WA</u>	ZIP CODE <u>98264</u>

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G1-02451CWRIS	RECORDED NAME(S) Charles A. Hillebrecht
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

A detailed discussion of the irrigation operations authorized under water right G1-02451C is included in the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	IW-3	SW	SE	6	39N	3E	390306263130	BHE782

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	IW-1	NE	SW	6	39N	3E	390306220231	BHE780
Irrigation Well	IW-2	NW	SE	6	39N	3E	390306331217	BHE781
Irrigation Well	IW-3	SW	SE	6	39N	3E	390306263130	BHE782

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME: _____

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	150 GPM	30.0	April 15 – October 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	150 GPM	30.0	April 15 – October 1

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
W1/4, SE1/4 of Section 6, T39N, R3E							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
W	SE	6	39N	3E	Whatcom	390306263130 390306250235	17.5 2.5
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: <u>See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.</u>							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
<u>Approximately 81.6 acres located in the south ½ of Section 6, Township 39 North, Range 3 East. See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.</u>							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
W	SE	6	39N	3E	Whatcom	See AESI report	20.0
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: <u>See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.</u>							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map. See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): <u>Water Right G1-09989C is supplemental to G1-02451C.</u>	
<u>See the attached Associated Earth Sciences "Project Summary Report", dated August 8, 2012.</u>	

6. Remarks and Other Relevant Information:

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

Andy Enfield

Applicant Printed Name – Title

Andy Enfield
Applicant Signature

8/28/12
(Date)

Marvin Enfield

Water Right Holder Printed Name

Marvin Enfield
Water Right Holder Signature

8/28/12
(Date)

Marvin Enfield

Land Owner of Existing Place of Use Printed Name

Marvin Enfield
Land Owner of Existing Place of Use Signature

8/28/12
(Date)

Marvin Enfield

Land Owner of Proposed Place of Use Printed Name

Marvin Enfield
Land Owner of Proposed Place of Use Signature

8/28/12
(Date)

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input checked="" type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____

ATTACHMENT FOR
Application for Change/Transfer of Water Right

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Jeff Scholten
☐ Applicant Printed Name – Title
☐ Water Right Holder Printed Name
☐ Land Owner of Existing Place of Use Printed Name
☒ Land Owner of Proposed Place of Use Printed Name

[Signature]
Applicant Signature
Water Right Holder Signature
Land Owner of Existing Place of Use Signature
Land Owner of Proposed Place of Use Signature

8/28/12
(Date)

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(Date)